

Work Order ID 125413

125413

Page 1

Tuesday, October 07, 2014 10:43:20 AM

Item ID: D4635-142 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Fwd Ceiling Replacement Panel Assembly, RH
 Start Date: 10/13/14 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 10/13/14 Req'd Qty: 1.00 ***1*** Customer:
 Reference:

Approvals: Process Plan: MCS Date: 10-10-09 Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D4635	E								
100		0.00							
100									
HandThermo	Memo	0.00							
Hand Finishing Thermoforming	Pick Kit								

DAS
 27
 0.89
 14/10/15

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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125413

Page 2

Item ID:	D4635-142	Accept	*N900040100*	Setup	Start	*NS1*
Revision ID:					Stop	*NS2*
Item Name:	Fwd Ceiling Replacement Panel Assembly, RH					
Start Date:	10/13/14	Start Qty:	1.00	*1*	Cust Item ID:	
Required Date:	10/13/14	Req'd Qty:	1.00	*1*	Customer:	
Reference:						

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	*NR1*
	QC:	Date:	SPC (Y/N):	Date:		Stop	*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
110		0.00							
110									
Small Fab	Memo	0.00							
Small Fab	Assemble as per Dwg D4635-142 Bond foam core to inside of panel 3M Scotch Weld 1300 Batch: <u>m130290</u>								
	1- Scuff bonding surface to eliminate in-perfections and increase bonding and clean with wash& wipe								
	2- Locate and glue down Channel Assy, angles, brackets, and mounting pads using 3M Plastic welder II.(see note 8)								
	Batch # <u>m130290</u>								
	Expiry Date <u>3/17/2015</u>								
	3- Apply labels as per Dwg. and seal with 3M 3950 edge sealer(see note 9)								
	Batch: <u>m127425</u>								
120	QC5- Inspect part completeness to step on W/O	0.00							
120									
QC	Memo	0.00							
Quality Control									

14/10/15

1 0

DAS
49
9-89
14/10/16

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 125413

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Page 3

Tuesday, October 07, 2014 10:43:20 AM

Item ID: D4635-142

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Fwd Ceiling Replacement Panel Assembly, RH

Start Date: 10/13/14 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 10/13/14 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: <u>mt</u>	0.00				DAS 27 9.00			
130									
Packaging	Memo	0.00				14/10/16			
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

14/10/17

AA 4-10-17

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

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Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design <input type="checkbox"/>									
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Handling/Pre <input type="checkbox"/>									
Material <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Offset/Setup <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Transport <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

Tuesday, October 07, 2014 10:43:20 AM

Page 1

Work Order ID: 125413

125413

Parent Item: D4635-142

D4635-142

Parent Item Name: Fwd Ceiling Replacement Panel Assembly, RH

Start Date: 10/13/14

Required Date: 10/13/14

Start Qty: 1.00

Required Qty: 1.00

Comments: Ipp Rev A New Issue 13/02/04 DL
Dwg. Update 12/11/08 DL
13/07/09 DL verf:DD
13/12/23 DL

IPP Rev B
IPP Rev. C Dwg Update
IPP Rev D Dwg Update Add Foam

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D4635-2		Manufactured	No			100	Each	0.0000	1	1		DAS 27 9-89	
D4635-2								B124979	**			14/10/15	
Fwd Ceiling Panel, RH													
D4669-1		Manufactured	No			100	Each	6.0000	2	2		DAS 27 9-89	
D4669-1									**			14/10/15	
Bracket													
				<u>Location</u>		<u>Loc Qty</u>	<u>Loc Code</u>						
				MF		6	B12410			2		DAS 27 9-89	
D4695-042		Manufactured	No		122474	100	Each	1.0000	1	1		14/10/15	
D4695-042									**				
Channel Assembly, RH													
				<u>Location</u>		<u>Loc Qty</u>	<u>Loc Code</u>						
				MF		1	B125012			1			
D4732-3		Manufactured	No		124212	100	Each	19.0000	1	1		DAS 27 9-89	
D4732-3									**			14/10/15	
Label													
				<u>Location</u>		<u>Loc Qty</u>	<u>Loc Code</u>						
				MF		18				1			
					120061	9							
					123201	9							
				ST122		1							
					111254	1							

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

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Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

Tuesday, October 07, 2014 10:43:20 AM

Page 2

Work Order ID: 125413

125413

Parent Item: D4635-142

D4635-142

Parent Item Name: Fwd Ceiling Replacement Panel Assembly, RH

Start Date: 10/13/14

Required Date: 10/13/14

Start Qty: 1.00

Required Qty: 1.00

D4732-31 Manufactured No

100 Each 19.0000 1 1

D4732-31

Label

**

DAS 27 9-89 11/10/15

Location

Loc Qty

Loc Code

MF

19

120076

7

123215

12

D4732-35 Manufactured No

100 Each 19.0000 1 1

D4732-35

Label

**

DAS 27 9-89 11/10/15

Location

Loc Qty

Loc Code

MF

19

120078

7

123217

12

D4732-7 Manufactured No

100 Each 19.0000 1 1

D4732-7

Label

**

DAS 27 9-89 11/10/15

Location

Loc Qty

Loc Code

MF4

19

120064

7

123203

12

D5022-1 Manufactured No

100 Each 17.0000 1 1

D5022-1

Foam, Side Panel, Fwd

**

DAS 27 9-89 11/10/15

Location

Loc Qty

Loc Code

MF

17

123925

17

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

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Doc/Data									
Equip/Tooling									
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Material									
Operator									
Offset/Setup									
Process									
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Training									
Transport									
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FAULT CATEGORY

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8 7 6 5 4 3 2 1

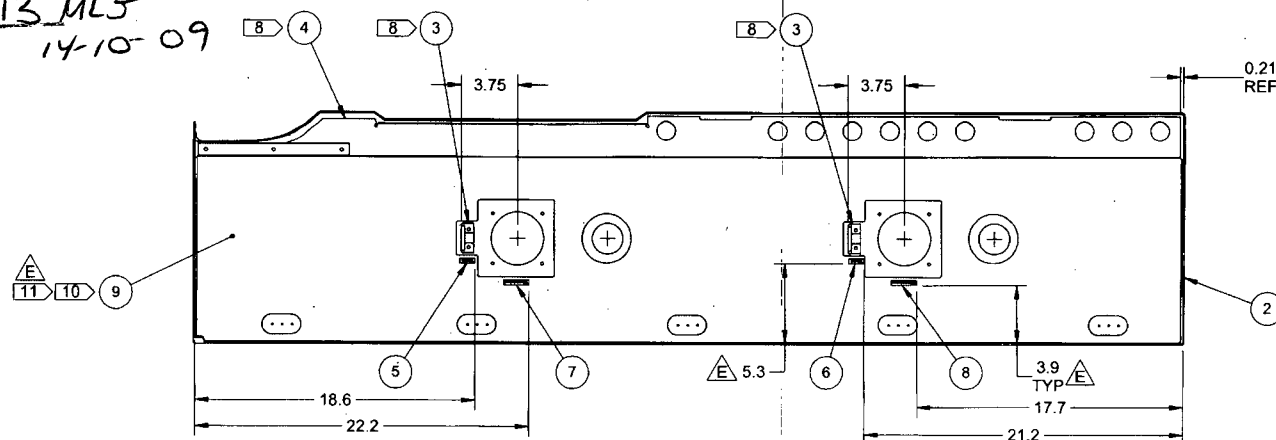
ITEM NO.	QTY. -142	PART NUMBER	DESCRIPTION
1	X	D4635-142	RH, FWD CEILING REPLACEMENT PANEL ASSY
2	1	D4635-2	RH, FWD CEILING PANEL
3	2	D4669-1	BRACKET
4	1	D4695-042	RH CHANNEL ASSEMBLY
5	1	D4732-3	LABEL
6	1	D4732-7	LABEL
7	1	D4732-31	LABEL
8	1	D4732-35	LABEL
9	1	D5022-1	FOAM, SIDE PANEL, FWD

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT

WITHOUT NOTICE
WORK ORDER

NO 125413 MLJ

14-10-09



D4635-142 RH, FWD CEILING REPLACEMENT PANEL ASSY

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) APPLY A BEAD (0.20 TO 0.30 WIDE) OF DEVCON PLASTIC WELDER II (0.25 INSIDE OF BOTH EDGES OF PART) TO BOND D4669-1 & D4695-042. WAIT FOR 2 TO 4 HOURS FOR FUNCTIONAL CURE
- 9) LOCATE LABELS AS SHOWN, SEAL LABELS USING 3950 EDGE SEALER OVER LABEL TOP SURFACE
- 10) APPLY AN EVEN COAT OF 3M SCOTCH WELD 1300L CONTACT ADHESIVE TO BOND D5022-1 FOAM CORE TO INSIDE OF PANEL
- 11) CENTER D5022-1 FOAM ON D4635-2

RELEASED
14-10-09-22

DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	PC	DRAWING NO.	REV. E
MFG. APPR.	PC	D4635	SHEET 10 OF 18
APPROVED	PC	TITLE	SCALE
DE APPR.	PC	OUTBOARD CEILING PANELS	NTS
DATE	14.01.09	COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

8 7 6 5 4 3 2 1